## **SFB BR 900-08**

## **Project Application Form**

## **Building Renewal Grant Application**

Initial Submission Date: 7/23/2013 9:29:33 AM Resubmittal Date:				Application ID: 628
Please provide as much of the requested information as possible. SFB staff will assist in developing required information that is not currently available.				
District Name:		Skull Valley Elementary District		
Superintendent:		Vicki HIlliker		
Contact Person:		Brandi Vastine		
Contact Phone Number:		928-442-3322		
Contact Email:		skullvalleyschool@gotsky.com		
School Site:		Skull Valley Elementary School		
Building	s:	1005	Replacement Building	
Existing which w system r	as covered by insur- needs to be repaire Category: Specia	m has malfunc rance. The systed.	please attach.  tioned twice, causing extensive dama stem currently leaks and may malfun  buildings or part of buildings that	ction again. The existing
entity, including a district sponsored charter school? N				
Available Funding				
Current unencumbere  Amount of Local funds		_	renewal fund balance (Fund 690):	\$0.00 \$0.00
L	Amount of Local It	unus pianneu i	or this project	φυ.υυ
	utline any associate			
Insurance only covered damage, not the remedy of correcting the problem.				
Liaison:	Breuer	Q	Jbreuer@azsfb.gov	602-542-6139
Superintendent Printed Name				

9/5/2013 10:15:15 AM 1

Date

Superintendent Signature